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| ABN 42 686 389 537 – PO BOX 151, KYNETON VIC 3444  T 03 5422 0333 – F 03 5422 3623 – [mrsc@mrsc.vic.gov.au](mailto:mrsc@mrsc.vic.gov.au) – mrsc.vic.gov.au | |

**Application for a Community Local Law Permit**

Select your permit type from the list below. For more information, refer to the relevant section of the [Community Local Law 2023](https://www.mrsc.vic.gov.au/About-Council/Our-Council/How-Council-Works/Local-Laws) listed below. Refer to [Local Laws Permit fees](https://www.mrsc.vic.gov.au/About-Council/Laws-Regulations/Permit-Fees) on Council’s Website.

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| **Permit Type** | | |
|  | Grazing and driving livestock - Part 2 (19) | |
|  | \*\*Use of scare guns - Part 3 (24) 1-8 | |
|  | \*\*Heavy and long vehicles (residential zone) - Part 3 (26) 1-3 | |
|  | \*\*Caravans/Motorhomes/Camping on private land - Part 3 (27) 1-8 | |
|  | \*\*Powered recreational vehicles - Part 3 (28) 1-3 | |
|  | Other (General Use & Activity on Council Land & Road) |  |

\*\*Public Liability Insurance not required for this type of permit.

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| **Applicant Details** | | | | | | |
| Full name: |  | | | | | |
| Address: |  | | | | | |
| Email: |  | | | Mobile: | |  |
| Preferred Method of Contact | |  | Email |  | Post | |

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| **Property Owner Details (if different from applicant)** | | | |
| Full name: |  | | |
| Address: |  | | |
| Email: |  | Mobile: |  |

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| **Description of Proposed Activity** | | | | | | |
| Location / address of proposed activity: | | |  | | | |
| Property Number: |  | | | | | |
| The Property Number is a 7-digit number which you can search for at [macedonranges.pozi.com](https://macedonranges.pozi.com/) | | | | | | |
| Date of activity | | From: | |  | To: |  |
| Time of activity (if applicable) | | From: | |  | To: |  |

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| **Description of Proposed Activity (continued)** | |
| I wish to be able to: | |
| Applicant Signature: |  |
| Owner Signature:  (if applicable) |  |

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| **Prepare your supporting documentation** |
| The following documentation is required for each permit unless otherwise stated.   * **Public Liability Insurance** **Certificate of Currency** (minimum $10 million cover)   \*\*Not required for this type of permit.   * **Aerial map of the proposed location of activity** * **Consent from Property owner if applicant not the owner** * **Traffic Management Plan (Grazing of Livestock)**   Refer to [Manual For Traffic control for Stock Crossings](https://www.vicroads.vic.gov.au/~/media/files/technical-documents-new/traffic-engineering-manual-v3/tem-vol-3-part-25-traffic-control-at-stock-crossings.pdf).   * **Other information required**   **Scare Guns** – Valid [Authority to Control Wildlife permit](https://www.vic.gov.au/wildlife-licences-and-permits) issued by Department of Energy, Environment and Climate Action (DEECA).  The information required to support each application will vary in nature. It will assist Council staff to properly assess your request and understand what is being proposed. Various Council units may be involved in assessing your application.  If you are unsure about the information you are required to provide, contact us to discuss before you submit your application. |
| **Submit your application** |
| * **In person:** present your application, supporting documents and payment at one of our customer service centres in Gisborne, Kyneton, Romsey or Woodend. * **By phone:** call our customer service team on (03) 5422 0333 to pay the application fee over the phone, and then: * email your completed application form and supporting documents to [mrsc@mrsc.vic.gov.au](mailto:mrsc@mrsc.vic.gov.au), or * post to Macedon Ranges Shire Council, PO Box 151, Kyneton VIC 3444. |

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| **Privacy** |
| Macedon Ranges Shire Council will only collect information from you with your knowledge and consent. Council will use personal information provided by you for the purposes for which it was collected. Personal information you provide to Council is protected by the Privacy and Data Protection Act 2014. Council will not disclose your personal information to a third party unless required by law. |

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| **Office use only** | | | | | |
| Receipt No: |  | Date: |  | Amount $: |  |